



UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE
 United States Patent and Trademark Office
 Address: COMMISSIONER FOR PATENTS
 P.O. Box 1450
 Alexandria, Virginia 22313-1450
www.uspto.gov



Bib Data Sheet

CONFIRMATION NO. 8755

SERIAL NUMBER 10/759,644	FILING OR 371(c) DATE 01/16/2004 RULE	CLASS 435	GROUP ART UNIT 1637	ATTORNEY DOCKET NO. INL-083CP6C5
-----------------------------	------------------------------------------------	--------------	------------------------	-------------------------------------

APPLICANTS

Jeffrey I. Auerbach, Rockville, MD;

**** CONTINUING DATA *******

This application is a CON of 10/143,862 05/14/2002 PAT 6,740,745 which is a CON of 09/899,834 07/09/2001 PAT 6,448,017
 which is a CIP of 09/657,943 09/08/2000 PAT 6,261,808
 which is a CIP of 09/188,214 11/09/1998 PAT 6,218,152
 which is a CON of 08/906,491 08/05/1997 PAT 5,834,202
 which is a CIP of 08/595,226 02/01/1996 PAT 5,733,733
 which is a CIP of 08/533,852 09/26/1995 PAT 5,614,389
 which is a CIP of 08/383,327 02/03/1995 PAT 5,591,609
 which is a CIP of PCT/US93/07309 08/04/1993
 which is a CIP of 07/933,945 08/24/1992 ABN
 which is a CIP of 07/924,643 08/04/1992 ABN

**** FOREIGN APPLICATIONS *********IF REQUIRED, FOREIGN FILING LICENSE GRANTED**

** 04/08/2004

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY	SHEETS DRAWING	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after	MD	19	2	2
Verified and Acknowledged	<i>Hunter Auerbach RPA</i> Examiner's Signature Initials				

ADDRESS

22832

TITLE

In vitro amplification of nucleic acid molecules via circular replicons

FILING FEE RECEIVED 770	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
----------------------------	-------------------------------------------------------------------------------------------------------------------	---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------